



State of California—Health and Human Services Agency  
Department of Health Services



ARNOLD SCHWARZENEGGER  
Governor

January 30, 2004

## California Children's Services (CCS) Approved Special Care Center (SCC) Provider Reimbursement Alert

The Children's Medical Services (CMS) Branch, Provider Services Unit (PSU), is updating the list of CCS Approved Special Care Centers in preparation for the Enhancement 47 (E-47) implementation. **Your future participation in the CCS program, including reimbursement, depends on your prompt attention to completing and returning the enclosed form along with a copy of your updated SCC directory. Please return the completed form to the CMS, PSU, no later than March 1, 2004.** Failure to provide the requested information will result in an inability to reimburse for SCC services.

**Effective July 1, 2004, the Department of Health Services (DHS) will implement E-47, a project that will allow providers to electronically submit claims to the fiscal intermediaries, Electronic Data Systems (EDS), for services provided to CCS clients. When billing for dates of service authorized after July 1, 2004, providers must utilize their Medi-Cal provider number regardless of the CCS client's eligibility type.**

In an effort to ensure a smooth transition, it is imperative that we receive by March 1, 2004, the following information:

- The active Medi-Cal provider number(s) used for billing outpatient SCC services for each SCC.
- An updated SCC directory, which lists all your current team members with their active **individual** or **rendering** Medi-Cal provider numbers. (**NOT group numbers, i.e., GR0000000, or hospital billing numbers, e.g., HSP000000**). You can download each SCC's team member listing off the website listed below. On this directory listing, please indicate each team member's active Medi-Cal provider number to the right of each team member's name. For those members who are employees and have no provider number, please put "employee," or other status, next to their name.

Each team member, excluding those team members who are employees of the hospital, must have an active individual Medi-Cal provider number in order to receive reimbursement for SCC services. Team members who are employees of the hospital or SCC, do not need to obtain a Medi-Cal provider number because the hospital or SCC will be billing for the SCC services they provide.

Those team members who do not have an “active” status Medi-Cal provider number must apply immediately for a Medi-Cal provider number as the Medi-Cal enrollment process may take up to six months for completion. You may obtain an application either by accessing the Medi-Cal website at [www.medi-cal.ca.gov](http://www.medi-cal.ca.gov) or calling 1-800-541-5555.

You may access the CMS website at [www.dhs.ca.gov/ccs](http://www.dhs.ca.gov/ccs) to obtain a copy of your SCC Directory. This directory page is to be used to provide the Medi-Cal provider numbers for team members. Also, the CMS website will have ongoing updates for information related to the E-47 implementation.

**In summary, please provide the CCS program with:**

- 1. The updated directory listing with each team member’s Medi-Cal provider number, and**
- 2. The form provided in this letter with your completed SCC information, including the hospital or SCC Medi-Cal billing number for each SCC.**

Please forward this information to:

**Mailing address:**

Aimee Yuki, Analyst  
Department of Health Services  
Children’s Medical Services Branch  
Provider Services Unit  
MS 8100  
P.O. Box 997413  
Sacramento, CA 95899-7413

Or

**Fax number:** (916) 322-1842, Attention: Aimee Yuki

Or

**e-mail** to [ayuki@dhs.ca.gov](mailto:ayuki@dhs.ca.gov)

Thank you in advance for providing us with this critical information needed for the E-47 conversion. Also, I want to express my appreciation for your continued participation in serving California’s Children with Special Health Care Needs through the CCS program.

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If you have any questions regarding this letter, please email Aimee Yuki, Provider Services Analyst, at [ayuki@dhs.ca.gov](mailto:ayuki@dhs.ca.gov) or call the CMS PSU main number at (916) 322-8702.

**Original Signed by Maridee A. Gregory**

Maridee A. Gregory, M.D., Chief  
Children's Medical Services Branch

Enclosure

Enclosure

**California Children's Services (CCS)**  
**Special Care Center (SCC) Information**

Hospital Name: \_\_\_\_\_

Hospital Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Contact Person Name: \_\_\_\_\_ Contact Phone #: \_\_\_\_\_

Name of CCS approved Special Care Center	Active Medi-Cal Billing Provider #	SCC Service Address

\_\_\_\_\_  
Hospital Representative (Please print name on line above)

\_\_\_\_\_  
Hospital Representative Signature

\_\_\_\_\_  
Signature Date